Complete and send t	his form, together wit	th applicable fe	e(s), to: <u>N</u>	<u>Mail</u> Mail Stop ISS Commissione	SUE FEE		
OCI 2 5 2000 to	<u></u>			P.O. Box 145 Alexandria, V	0 Virginia 22313-	1450	
NICTONOMONIC, THESE	should be used for two	amitting the ISSIII	or <u>l</u>			t through 5 sl	hould be completed where
appropriate. All finance corndicated unless corrected in naintenance fee notification	respondence including the below or directed otherwise as.	Patent, advance ord in Block 1, by (a)	lers and noti specifying	ification of maintenance for a new correspondence add	ees will be mailed dress; and/or (b) inc	to the current licating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for
	E ADDRESS (Note: Use Block 1 for 590 09/14/2004	any change of address)		Note: A certificate Fee(s) Transmittate papers. Each additional papers.	te of mailing can only. This certificate californial paper, such a lifecate of mailing or	nly be used for annot be used it as an assignment as an assignment ransmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must
Leydig Voit & M					Cartificate of Ma	iling or Trans	mission
Two Prudential Pla				I hereby certify the States Postal Serv	hat this Fee(s) Tran	smittal is being	g deposited with the United st class mail in an envelope
Suite 4900	Suite 4900 180 North Stetson Chiange W. (0001 6780)				I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimil transmitted to the USPTO (703) 746-4000, on the date indicated below.		
					Vladan M. Vasiljević		
		ວວ			le Illa	here	(Signature)
FC:1501 1370.00) JH			Öctober	20, 2004		(Date)
APPLICATION NO.	FILING DATE	F	FIRST NAME	D INVENTOR	ATTORNEY I	OOCKET NO.	CONFIRMATION NO.
09/513,155	02/25/2000		Paramy	vir Bahl	200	410	7877
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL FE	E(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$0	TOTAL FE		12/14/2004
nonprovisional EXAM	NO MINER	\$1330 ART UNI		\$0 CLASS-SUBCLASS			
nonprovisional EXAM PERSINO, R	NO MINER AYMOND B	\$1330 ART UNI 2682	Т	\$0 CLASS-SUBCLASS 455-456100	\$13	330	12/14/2004
nonprovisional EXAM PERSINO, R 1. Change of correspondenc CFR 1.363).	NO MINER AYMOND B The address or indication of "F	\$1330 ART UNI 2682 See Address" (37	2. For prii	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered	\$13	330	
nonprovisional EXAM PERSINO, R 1. Change of correspondenc CFR 1.363).	NO MINER AYMOND B	\$1330 ART UNI 2682 See Address" (37	2. For prin (1) the na or agents	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively,	\$13	330	12/14/2004
nonprovisional PERSINO, R 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1	NO MINER AYMOND B The address or indication of "F	\$1330 ART UNI 2682 See Address" (37 Correspondence	2. For prin (1) the na or agents	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered	\$13	330	12/14/2004
nonprovisional PERSINO, R 1. Change of correspondenc CFR 1.363). Change of correspondenc Address form PTO/SB/1. "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND	NO MINER AYMOND B de address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E	\$1330 ART UNI 2682 Fee Address" (37 Correspondence eation form se of a Customer BE PRINTED ON T	2. For prii (1) the na or agents (2) the na registered 2 registered isted, no	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front parames of up to 3 registered OR, alternatively, me of a single firm (havin attorney or agent) and the d patent attorneys or agenname will be printed. T (print or type)	sige, list patent attorneys ag as a member a e names of up to atts. If no name is	1 Leydig 23	12/14/2004 , Voit & Mayer
nonprovisional PERSINO, R 1. Change of correspondenc CFR 1.363). Change of correspondenc Address form PTO/SB/1. "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND	NO MINER AYMOND B de address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E	\$1330 ART UNI 2682 Fee Address" (37 Correspondence eation form se of a Customer BE PRINTED ON T	2. For prii (1) the na or agents (2) the na registered 2 registered isted, no	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front parames of up to 3 registered OR, alternatively, me of a single firm (havin attorney or agent) and the d patent attorneys or agenname will be printed. T (print or type)	sige, list patent attorneys ag as a member a e names of up to atts. If no name is	1 Leydig 23	12/14/2004
nonprovisional PERSINO, R 1. Change of correspondenc CFR 1.363). Change of correspondenc Address form PTO/SB/1. "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND	NO MINER AYMOND B The address or indication of "Formula dence address (or Change of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached. The address or indication of "Formula dence of 22) attached.	\$1330 ART UNI 2682 Fee Address" (37 Correspondence lation form the of a Customer BE PRINTED ON The low, no assigned to of this form is NOT	2. For prin (1) the na or agents (2) the na registered 2 registered listed, no HE PATEN data will app a substitute	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front parames of up to 3 registered OR, alternatively, me of a single firm (havin attorney or agent) and the d patent attorneys or agenname will be printed. T (print or type)	sige, list patent attorneys ag as a member a e names of up to assignee is identifie	1 Leydig 23	12/14/2004 , Voit & Mayer
nonprovisional PERSINO, R 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	NO MINER AYMOND B de address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E s an assignee is identified b in 37 CFR 3.11. Completion	\$1330 ART UNI 2682 Fee Address" (37 Correspondence eation form se of a Customer BE PRINTED ON T below, no assignee of this form is NOT (B)	2. For prin (1) the na or agents (2) the na registered 2 registered listed, no HE PATEN a substitute (2) RESIDENCE	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, and of a single firm (havin attorney or agent) and the depatent attorneys or agent name will be printed. T (print or type) Dear on the patent. If an a for filling an assignment.	sige, list patent attorneys ag as a member a e names of up to assignee is identifie	1 Leydig 23	12/14/2004 , Voit & Mayer
nonprovisional PERSINO, R 1. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN MICROSOFT COR	NO MINER AYMOND B de address or indication of "F dence address (or Change of 22) attached. tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E s an assignee is identified b in 37 CFR 3.11. Completion	\$1330 ART UNI 2682 Fee Address" (37 Correspondence ention form the of a Customer BE PRINTED ON The low, no assigned coff this form is NOT (B)	2. For prin (1) the na or agents (2) the na registered 2 registered listed, no HE PATEN data will app a substitute) RESIDENC REDMOND	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, me of a single firm (havin attorney or agent) and the ed patent attorneys or agenname will be printed. T (print or type) Dear on the patent. If an application of the patent. If an application of the patent. CE: (CITY and STATE OR), WASHINGTON	\$13 age, list patent attorneys ag as a member a e names of up to ats. If no name is assignee is identifie	Leydig 2 3 d below, the d	12/14/2004 , Voit & Mayer
nonprovisional PERSINO, R 1. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN MICROSOFT COR Please check the appropriate 4a. The following fee(s) are	NO MINER AYMOND B The address or indication of "Formation dependence address (or Change of 22) attached. The address of the address in a sasignee is identified beneating in the address in a sasignee in the address in a sasignee is identified beneating in the address in the	\$1330 ART UNI 2682 Fee Address" (37 Correspondence Lation form lee of a Customer BE PRINTED ON Tollow, no assignee of of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B)	2. For prin (1) the na or agents (2) the na registered 2 registered listed, no THE PATEN data will app T a substitute) RESIDENG REDMOND	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, one of a single firm (havin attorney or agent) and the depatent attorneys or agent and the patent attorneys or agent and the printed. T (print or type) Dear on the patent. If an age for filing an assignment. CE: (CITY and STATE OF OR OF	sige, list patent attorneys ag as a member a e names of up to nts. If no name is assignee is identifie R COUNTRY)	Leydig 2 3 d below, the d	12/14/2004 7, Voit & Mayer Nocument has been filed for
nonprovisional PERSINO, R 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN MI CROSOFT COR Please check the appropriate 4a. The following fee(s) are	NO MINER LAYMOND B The address or indication of "Formation (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indication (or more recent) attached. Us DIRESIDENCE DATA TO BE IN A STATE OF THE INDICATION (FEE RPORATION) The assignee category or category or category enclosed:	\$1330 ART UNI 2682 Fee Address" (37 Correspondence eation form se of a Customer BE PRINTED ON Total on the form is NOT (B) Tories (will not be printed the form is NOT)	2. For prii (1) the na or agents (2) the na registered 2 registered 1 registered 2 registered 2 registered 2 registered 2 registered 1 registered 2 registered 2 registered 1 registered 2	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, and the depatent attorney or agent) and the depatent attorneys or agent and the property of the patent attorneys or agent and the patent attorneys or agent and the printed. T (print or type) Dear on the patent. If an age for filing an assignment. CE: (CITY and STATE OF OR, WASHINGTON OF THE PATENT OF OR THE PATENT OF O	sige, list patent attorneys ag as a member a e names of up to nts. If no name is assignee is identifie R COUNTRY) Corporation or co is enclosed.	Leydig 2 3 d below, the d	12/14/2004 7, Voit & Mayer Nocument has been filed for
nonprovisional PERSINO, R 1. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN MI CROSOFT COR Please check the appropriate 4a. The following fee(s) are	NO MINER AYMOND B The address or indication of "Formation defence address (or Change of 22) attached. A tion (or "Fee Address" Indiction more recent) attached. Use the complete of an analysis of the completion of the complet	\$1330 ART UNI 2682 See Address" (37 Correspondence sation form se of a Customer BE PRINTED ON Total selow, no assigned of this form is NOT (B) Tories (will not be printed)	2. For prin (1) the na or agents (2) the na registered 2 registered 2 registered isted, no THE PATENT data will app a substitute REDMOND inted on the p Payment of A check Payment	\$0 CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, and the dipatent attorney or agent) and the dipatent attorneys or agent of the dipatent attorneys or agent attorneys or agent attorneys or agent of the dipatent attorneys or agent of the dipatent. If an agent of the dipatent of the for filing an assignment. CE: (CITY and STATE OF OR WASHINGTON of the dipatent): Individual of Fee(s): in the amount of the fee(s) the patent of the fee(s) the fee(s) the patent of the fee(s) t	sige, list patent attorneys ag as a member a e names of up to assignee is identified R COUNTRY) Corporation or co is enclosed. 0-2038 is attached.	Leydig 2 3 d below, the continuous private gr	12/14/2004 Noit & Mayer Cocument has been filed for oup entity Government
nonprovisional PERSINO, R 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN MI CROSOFT COR Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # o	NO MINER AYMOND B The address or indication of "Formation dependence address (or Change of 22) attached. A tion (or "Fee Address" Indicor more recent) attached. Us an assignee is identified by a 37 CFR 3.11. Completion of the assignee category or category enclosed:	\$1330 ART UNI 2682 Fee Address" (37 Correspondence sation form se of a Customer BE PRINTED ON Total selection of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B) In the correspondence of this form is NOT (B)	2. For prin (1) the na or agents (2) the na registered 2 registered 2 registered iisted, no THE PATEN' data will app a substitute REDMOND inted on the p Payment of A check Payment The Dir Deposit Acc	CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, and the dipatent attorney or agent) and the dipatent attorneys or agent and the patent of the patent. If an a for filing an assignment. CE: (CITY and STATE OF D., WASHINGTON patent): Individual of Fee(s): in the amount of the fee(s) to by credit card. Form PTO rector is hereby authorized count Number	sige, list patent attorneys ag as a member a e names of up to nts. If no name is assignee is identifie assignee is identifie accountry) Corporation or co is enclosed. 2-2038 is attached.	d below, the control of the private granter decision an extra control of the cont	locument has been filed for oup entity Government credit any overpayment, to copy of this form).
nonprovisional PERSINO, R 1. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN MI CROSOFT COR Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution of the content of the conten	NO MINER AYMOND B The address or indication of "Formation defence address (or Change of 22) attached. The statement of the	\$1330 ART UNI 2682 See Address" (37 Correspondence ation form se of a Customer BE PRINTED ON T selow, no assignee of of this form is NOT (B) Ories (will not be pri 4b. ded) ee) 37 CFR 1.27.	2. For prin (1) the na or agents (2) the na registered 2 registered 2 registered isted, no THE PATENT data will app a substitute REDMOND inted on the p Payment of A check Payment The Dir Deposit Acc	CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, one of a single firm (havin lattorney or agent) and the depatent attorneys or agent for filling an assignment. CE: (CITY and STATE OF ACTION OF ACTIO	signer is the patent attorneys age as a member a enames of up to nts. If no name is assignee is identified assignee is identified accordance to the composition of th	d below, the continued fee(s), or close an extra contatus. See 37 C	locument has been filed for oup entity Government credit any overpayment, to copy of this form).
nonprovisional PERSINO, R 1. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN MI CROSOFT COR Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution of the content of the conten	NO MINER AYMOND B The address or indication of "Formation defence address (or Change of 22) attached. The statement of the	\$1330 ART UNI 2682 See Address" (37 Correspondence ation form se of a Customer BE PRINTED ON T selow, no assignee of of this form is NOT (B) Ories (will not be pri 4b. ded) ee) 37 CFR 1.27.	2. For prin (1) the na or agents (2) the na registered 2 registered 2 registered isted, no THE PATENT data will app a substitute REDMOND inted on the p Payment of A check Payment The Dir Deposit Acc	CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, one of a single firm (havin lattorney or agent) and the depatent attorneys or agent for filling an assignment. CE: (CITY and STATE OF ACTION OF ACTIO	signer is the patent attorneys age as a member a enames of up to nts. If no name is assignee is identified assignee is identified accordance to the composition of th	d below, the continued fee(s), or close an extra contatus. See 37 C	locument has been filed for oup entity Government credit any overpayment, to copy of this form).
nonprovisional PERSINO, R 1. Change of correspondence CFR 1.363). Change of correspondence Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN MI CROSOFT COR Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution of the content of the conten	NO MINER AYMOND B The address or indication of "Formation defence address (or Change of 22) attached. The statement of the	\$1330 ART UNI 2682 See Address" (37 Correspondence lation form se of a Customer BE PRINTED ON Tololow, no assigned of this form is NOT (B) Ories (will not be pri 4b. 100 100 100 100 100 100 100 1	2. For prin (1) the na or agents (2) the na registered 2 registered 2 registered isted, no THE PATENT data will app a substitute REDMOND inted on the p Payment of A check Payment The Dir Deposit Acc	CLASS-SUBCLASS 455-456100 Inting on the patent front patents of up to 3 registered OR, alternatively, one of a single firm (havin lattorney or agent) and the depatent attorneys or agent for filling an assignment. CE: (CITY and STATE OF ACTION OF ACTIO	signer is the patent attorneys age as a member a enames of up to nts. If no name is assignee is identified assignee is identified accordance to the composition of th	d below, the obtained fee(s), or close an extra obtained see 37 Cope to the applic y or agent; or to	locument has been filed for oup entity Government credit any overpayment, to copy of this form).

Registration No. 45, 177 This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.